	OMENI	ΓRANSMI	TTAL LE	TTER	Docket No. 0905-0290P
Application No. 10/614,187-Conf. #7097		Filing Date		Examiner	Art Unit
		July 8, 2003		H. Safaipou	r 2625
plicant(s): Toru	NISHIMURA				
ention: APPAR DEVIC		ORRECTING:	SOLID-STAT	E ELECTRONIC IM	IAGE SENSING
mmissioner for I D. Box 1450 exandria, VA 223 ransmitted here	313-1450 with is an ame				
he fee has beer	n calculated an		S AS AMENI		
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	0	- 20 =	0	× 50.00	0.00
Independent Claims	0	- 3 =	0	x 210.00	0.00
Other fee (pleas		OR THIS AME	NDMENT:		0.00
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TOTAL ADDIT  x Large Entity x No additions Please char A duplicate A check in the Payment by x The Director as described x Credit a	al fee is require ge Deposit Accopy of this shahe amount of \$ credit card. F r is hereby autt d below. A duy in yoverpayme any additional fi	ed for this ame count Noeet is enclosed of count PTO-2038 horized to charplicate copy of nt.	NDMENT:  Indment.  i.  i.  is enclosed is attached.  Independent is a second credit in this sheet is a second processing.	n the amount of \$sed.  Deposit Account Nenclosed.	